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August 1, 2007

Iowa Department of Human Services
Bureau of Managed Care and Clinical Services
Attention: Cynthia Tracy
100 Army Post Road
Des Moines, IA 50315

RE: Iowa Plan Capitation Rate Setting – SFY 2008 Rates

Dear Ms. Tracy:

Enclosed are the Iowa Plan ranges of actuarially sound capitation rates for SFY 2008. The rate ranges are actuarially sound by rate cell, as required by CMS. The rates were developed using encounter data provided by Magellan, the community reinvestment expenditures file, and other program information. The rates comply with CMS requirements.

The rates have been trended forward for changes in utilization and costs. The rates consider the change in ACT, Mobile Counseling and Mobile Crisis from B(3) to State Plan effective July 1, 2007. A review of the financial status of Magellan, a common practice in Medicaid rate setting, was also completed.

In order to be consistent with CMS requirements, the actual capitation rate in each rate cell cannot be higher than the upper bound or lower than the lower bound shown in the report. Using the midpoint of the projected rate range, the rates would represent an approximate 0.8% increase from the midpoint of the October 1, 2006 – June 30, 2007 (Report dated June 25, 2007) range of rates on an aggregate basis using SFY 2006 enrollment as the weights. The lower end of the range would represent a 5.3% decrease while the upper end would represent a 7.0% increase.

This letter is being provided to Iowa DHS. It is our understanding that this report will be distributed to CMS and potentially to any interested MCO. Any distribution of this report must be in its entirety.

If you have any questions, please let us know.

Sincerely,

Timothy F. Harris, FSA, MAAA
Principal & Consulting Actuary

**STATE OF IOWA
IOWA PLAN - MH/SA CAPITATION RATES
MEDICAID PROGRAM
STATE FISCAL YEAR 2008**

Prepared for:
**IOWA DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL SERVICES**

Prepared By:

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August 1, 2007

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I. INTRODUCTION

Milliman, Inc. (Milliman) was retained by the Iowa Department of Human Services (DHS) to calculate a range of actuarially sound capitation rates for the Iowa Plan for Behavioral Health (Iowa Plan) for SFY 2008. This report presents the results of the calculations and describes the rate setting methodology.

This report is being provided to the Iowa DHS. It is our understanding that this report will be distributed to the Centers for Medicare and Medicaid Services (CMS) and potentially to any interested Managed Care Organization (MCO). It should not be distributed to any other party without our prior written consent. Any distribution of this report must be in its entirety.

The values in this report were developed on behalf of the State of Iowa for use in negotiations with carrier(s) interested in participating in the Iowa Plan program and may not be appropriate for any other purpose. We do not intend to benefit, and assume no liability to, any third party who receives this report.

Milliman has relied on the following data sources as provided by Iowa DHS:

- Iowa Medicaid claims data – SFY 2005 - SFY 2006
- Iowa Medicaid eligibility data – SFY 2005- SFY 2006
- Various Iowa Medicaid program documents
- PIHP financial information
- Additional information including cost estimates relating to program changes from the State and the PIHP provided in conference calls and emails

The values presented are based on a series of historical data and projections. Actual results may differ from the projected values. Although the data was reviewed for reasonableness, Milliman has not audited the data. If the information provided to Milliman was inaccurate or incomplete, this report may need to be revised.

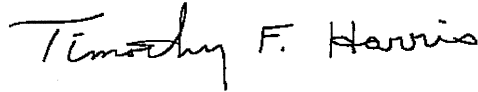
The rates in this report are estimates but not predictions. While we believe the rates to be reasonable, they may not be appropriate for any particular contractor. Before contracting with the State, the contractor should review its own experience and revenue requirements with an actuary or other professional competent in finance and modeling.

II. ACTUARIAL CERTIFICATION

In calculating the rates found in this report, we have followed generally accepted actuarial principles and practices. We believe that the capitation rates developed in this report are appropriate for the populations to be covered and the services to be furnished under the contract.

The actuary certifying these rates meets the qualification standards of the American Academy of Actuaries and follows the standards of practice established by the Actuarial Standards Board. We have relied on historical data, background information, and cost estimates provided to us by the State, the fiscal agent, and the PIHP. We have reviewed the data for reasonableness but have not audited the data. We believe, and certify, that these rates were developed using a methodology that is consistent with the regulation in 438.6 (c) and with the rate checklist released by CMS.

These rates were developed on behalf of the State of Iowa to demonstrate compliance with CMS requirements. We do not certify that these rates are appropriate for any particular MCO. The MCO is advised to conduct its own analysis of experience and revenue requirements before agreeing to contract with the State.



Timothy F Harris, FSA, MAAA

August 1, 2007

Date

III. OVERVIEW OF RATE SETTING METHODOLOGY

This section describes, in general, the methodology used to calculate the range of actuarially sound Iowa Plan capitation rates. The results of the calculations are shown in Section IV. A more detailed discussion of the calculations is included in Section V.

The primary data source for the SFY 2008 Iowa Plan rate setting was the Iowa Plan encounter data from SFY 2005 - SFY 2006 (July 1, 2004 through June 30, 2006). The claims data includes information regarding both the utilization of healthcare services and the cost of those services.

An actuarial model was developed using the SFY 2006 utilization and cost data as the base data in the model. Total eligible months for SFY 2006 were calculated from Iowa Medicaid eligibility data and incorporated into the model to develop utilization per 1,000 eligibles statistics. The equivalent data from SFY 2005 was used to estimate the utilization trend rate. A similar trend rate was calculated for average costs.

All utilization and average cost data were summarized into service categories (using the benefit field code) by category of aid, age group, and gender.

Categories of aid include the following:

- Family Medicaid Assistance Program (FMAP) and FMAP-related
- Supplemental Security Income (SSI) and SSI-related
- Dual Eligibles under age 65
- Foster Care

To calculate the rates, the baseline data was adjusted for the following:

- Claims incurred but not yet paid;
- PIHP administrative expense;
- Utilization and cost trending;
- Community reinvestment;
- Program changes; and
- Managed care.

Consideration was given to other potential adjustments such as copayments and financial experience but these other adjustments were determined to be unnecessary.

To calculate the range of actuarially sound rates for SFY 2008, upper and lower points were determined by using varying degrees of healthcare management (DOHM) for psychiatric and substance abuse services in a Medicaid population.

DOHM is a concept used by Milliman to quantify the expected utilization and average charge of a population based on the extent to which its care is being managed. A 0% DOHM would indicate a loosely managed plan while a 100% DOHM would indicate a very well managed plan. A high DOHM would result from the efficient and effective use of multiple cost management programs (pre-admission testing, large case management, concurrent review,

etc.) but would also be influenced by such factors as the geographic distribution of the population. There is much judgment involved in determining the appropriate DOHM. The final range of actuarially sound capitation rates reflects this judgment.

The impact of varying degrees of DOHM was based on the Milliman Health Cost Guidelines (HCGs). The HCGs are a cooperative effort of all Milliman health actuaries and represent a combination of their experience, research, and judgment. They provide a flexible but consistent basis for the determination of claim costs and premium rates for a wide variety of health benefit plans. The underlying utilization and charge level assumptions can be characterized as typical of a large group of relatively benefit conscious individuals covered under a comprehensive state Medicaid medical plan. The base assumptions are typically adjusted for age, gender, area, benefit design, etc.

IV. SUMMARY OF RESULTS

The calculations used to develop the SFY 2008 capitations are summarized, in aggregate, below.

SFY 2006 paid claims (Non-Community Reinvestment)	\$70,087,938
Adjustments (IBNR, PIHP Administration Costs, Utilization and Cost Trending, Community Reinvestment, Copays, Managed Care, Program Changes, etc)	\$35,377,155
Total SFY 2008 capitations at SFY 2006 enrollment levels (midpoint)	\$105,465,093

The following tables show the midpoints of the SFY 2008 Iowa Plan Medicaid PMPM Capitation Rate Ranges, by rate cell, for services required under the Iowa Plan contract. To allow for separate monitoring of B(3) services, capitation rates for both State Plan services and for B(3) services are included in Table 1-B and Table 1-C, respectively. B(3) costs were based on the B(3) procedure codes provided by the PIHP.

Overall, the midpoint of the SFY 2008 actuarially sound range of rates will result in an estimated 0.8% increase from the midpoint of the October 1, 2006 – June 30, 2007 (June 25, 2007 report) range of rates, while the lower bound of the range would represent a 5.3% decrease and the upper bound would represent a 7.0% increase.

Appendix F provides rates (State Plan, B(3), and Total) for the upper and lower bounds of the actuarially sound range of rates. The lower bound of the range was calculated using a 55% DOHM while the higher bound was calculated using a 35% DOHM. The midpoint of the rate ranges use the current level of management inherent in the encounter data, which is assumed to be 45% for the purposes of calculating the range of rates.

TABLE 1-A IOWA MEDICAID SFY 2008 IOWA PLAN CAPITATION RATE MIDPOINT		
CATEGORY/AGE RANGE	FEMALE	MALE
FMAP 0 – 17	\$8.79	\$10.57
FMAP 18 – 64	32.44	22.88
SSI 0 – 17	32.86	44.51
SSI 18 – 64	106.62	97.86
Dual Eligibles 0 – 64	56.84	62.41
Foster Care 0 – 9	36.38	56.43
Foster Care 10 – 22	151.53	158.91

TABLE 1-B
IOWA MEDICAID SFY 2008
IOWA PLAN CAPITATION RATE – STATE PLAN SERVICES
MIDPOINT

CATEGORY/AGE RANGE	FEMALE	MALE
FMAP 0 – 17	\$8.38	\$10.05
FMAP 18 – 64	22.42	19.71
SSI 0 – 17	32.26	43.57
SSI 18 – 64	90.40	84.69
Dual Eligibles 0 – 64	34.47	40.67
Foster Care 0 – 9	35.78	50.74
Foster Care 10 – 22	134.02	143.45

TABLE 1-C
IOWA MEDICAID SFY 2008
IOWA PLAN CAPITATION RATE – B(3) SERVICES
MIDPOINT

CATEGORY/AGE RANGE	FEMALE	MALE
FMAP 0 – 17	\$0.41	\$0.52
FMAP 18 – 64	10.02	3.17
SSI 0 – 17	0.60	0.94
SSI 18 – 64	16.22	13.17
Dual Eligibles 0 – 64	22.37	21.74
Foster Care 0 – 9	0.60	5.69
Foster Care 10 – 22	17.51	15.46

The following table compares the expected aggregate capitations using the assumed midpoint of the October 1, 2006 – June 30, 2007 (June 25, 2007 report) rates and the assumed SFY 2008 rates at the SFY 2006 level of enrollment. The composite rates were calculated using SFY 2006 member months as weights.

TABLE 2 AGGREGATE RESULTS			
	Composite PMPM Rates	SFY 2006 Member Months	Projected Expenditures (Annualized)
10/1/06–6/30/07 Rates (midpoint)	\$31.01	3,372,228	\$104,579,551
SFY 2008 Rates (midpoint)	\$31.27	3,372,228	\$105,465,093
Increase/Decrease			0.8%

V. DESCRIPTION OF RATE CALCULATIONS

The following section describes the steps used to calculate the SFY 2008 Iowa Plan capitation rates.

1. **Calculate Eligible Months**

For the rate setting, eligibility data provided by Iowa DHS was used to determine the total number of months of eligibility for Medicaid recipients meeting the eligibility requirements of the Iowa Plan program. The eligibility data from DHS contained information on all Medicaid recipients for each month of SFY 2005 - SFY 2006. A Medicaid recipient was considered eligible for the Iowa Plan program by month if the recipient was an active enrollee and had a valid alternate delivery indicator. The following table shows the categories of eligibility included in the study along with the appropriate alternate delivery indicator(s).

TABLE 3 IOWA MEDICAID IOWA PLAN ALTERNATE DELIVERY INDICATORS INCLUDED IN EACH RATE CELL	
Category	Alternate Delivery Indicators
FMAP 0 – 17	A, C, E, G
FMAP 18 – 64	B, D, F, H
SSI 0 – 17	J, L, N, Q
SSI 18 – 64	K, M, P, R
DUAL ELIGIBLES 0 – 64	S, T
FOSTER CARE 0 – 9	W
FOSTER CARE 10 – 22	V*, X

* The age group for code V is 0 – 22; however, the only individuals with this code were in the 10 – 22 category.

Iowa Plan also restricts eligibility to individuals not in the following categories:

- A person who is eligible for Medicaid as a result of spending down excess income (medically needy with a cash spend-down).
- A person living in the Woodward State Hospital-School or the Glenwood State Hospital-School.
- Those whose Medicaid benefit package is limited such as Qualified Medicare Beneficiaries (QMB), Presumptive Eligibles, illegal aliens and others not entitled to the full range of mental health and substance abuse treatment.
- Persons age 65 and older.

Based on discussions with the State and the PIHP, the use of Table 3 above to determine eligibility is presumed to exclude these individuals.

Once calculated, eligible months were summarized by category of aid, age group, and gender. Appendix A summarizes the eligibles by rate cell groupings.

2. Calculate Base Historical Encounter Claims

Iowa Plan encounter data excluding denied claims was provided by the PIHP for claims paid through October 7, 2006. Claims for services included in the Iowa Plan program were extracted from this encounter data using the following criteria:

- a. Claims with a beginning date of service between (and including) July 1, 2004 and June 30, 2006.
- b. Claims without a Community Reinvestment code (the cost for Community Reinvestment is included as an adjustment).
- c. Claims where the claimant was determined to be eligible after cross-referencing with the eligibility file. This step removed approximately 0.2% of claim dollars from the base period. Due to mass adjustments that are not tied to individuals, some of these claims were excluded in this step (and the following two steps.) However, this issue was considered immaterial to SFY 2006 as the mass adjustments mainly affected claims incurred in SFY 2005. Adjustments to the trend calculations are described below.
- d. Claims for diagnosis codes 290.00 - 309.99 and 311.00 through 314.99. This step removed an additional 0.3% of claim dollars from the base period.
- e. The following codes had additional age restrictions:
 - PMIC – T2048: 17 and under
 - Assertive Community Treatment – H0040: Over 18
 - Community Support Services – H0037: Over 18
 - Intensive Psychiatric Rehab – H2017: Over 18
 - School Based Specialist – H0036: 17 and Under
 - Targeted Case Management – T2022: Over 18
 - Drop-in Center/Clubhouse – H2031: Over 18
 - Co-occurring Disorder – T2023: Over 18
 - CAFAS functioning scale – H0002: 17 and Under
 - PASARR – T2011: Over 18

This step removed an additional 0.1% of claim dollars from the base period.

- f. The Iowa Plan encounter data fell into the service categories shown in Table 4 below. Claims with blank service categories were not removed because both the State and the PIHP are confident that the charge data is accurate and complete. Similarly, claims with procedure codes outside of the range of specified codes were also not removed. Prescription drugs, RTS, ARO, and PMIC - MH are considered wraparounds and are paid on a FFS basis.

TABLE 4
IOWA PLAN APPROVED SERVICES

23 Hour Observation	Level III.1 – Halfway House – SA
ACT/PACT	Level III.5/III.3 – Primary Extended - SA
Clozapine Labs	Level III.7 – Med Monitored Res. - SA
Community Support Services	Level IV – Inpatient – SA
Day Treatment	Mobile Crisis
Emergency Transportation	Non-Emergency Transportation
Home Based Care	Outpatient
Home Psych Nursing	Partial Hospitalization
Inpatient – MH	PMIC
Intensive Outpatient	Residential
Intensive Psych Rehab	Respite
Level I – Outpatient – SA	Subacute
Level II – Intensive Outpatient – SA	Targeted Case Management

The split between B(3) and non-B(3) services was determined using a list of B(3) procedure codes provided by the State and PIHP.

Some mass adjustments were made to the claims as well. These did not have a large impact on the SFY 2006 experience but did significantly affect the SFY 2005 experience.

3. **Develop Cost Model**

An actuarial cost model is a tool that allows historical utilization and reimbursement to be interpreted on a per member basis for specific service categories. The development of the cost model used for the Iowa Plan rate calculation is described in this section.

Service Categories

The service categories found in the encounter data were used as the major categories into which the encounter data was grouped.

Eligible Months

Eligible months represent the total number of months of exposure of the population during the time period. Each beneficiary contributes one member month for each full month of eligibility in the program. Eligible months are calculated for each category of aid, age group, and gender. The tabulated eligible months are shown in Appendix A.

Utilization Rates per 1,000

Utilization rates per 1,000 represent the annual (or annualized) number of encounters per 1,000 eligible (exposed) members. The definition of utilization varies by general service category definition.

The calculation of utilization rates per 1,000 is based on the following formula that is used for all service categories:

$$\text{Utilization Rates per 1,000} = \frac{\text{Claim Counts} \times 12 \times 1,000}{\text{Member Months}}$$

Net Reimbursed Charges

Net reimbursed charges were based on the “AmtPd” field of the encounter data.

The total reimbursed amount is net of TPL payments. The TPL payments will be collected by the PIHPs. There are no recipient copayments.

Per Member Per Month

The per member per month (PMPM) value is calculated using the following formula:

$$\text{PMPM} = \frac{\text{Annual Utilization per 1,000} \times \text{Average NET Reimb. Charges}}{12 \times 1,000}$$

Base year utilization rates, charge data and PMPMs are shown in Appendix B.

Rating Categories

The encounter data and eligibility were categorized into rating categories based on the age group, gender and category of aid. These rate cell divisions were created to group individuals with similar expected cost and utilization characteristics together. Because there is a single PIHP contractor, rates for different regions within the state were not created.

The following age/category of aid groups were used for male and female eligibles:

- FMAP 0 through 17 years
- FMAP 18 through 64 years
- SSI 0 through 17 years
- SSI 18 through 64 years
- Dual Eligibles 0 through 64 years
- Foster Care 0 through 9 years
- Foster Care 10 through 22 years

Appendix A contains a summary of the baseline data (SFY 2006) used in the cost model.

4. Calculate Capitation Rate

To calculate the capitation rate, the following adjustments were made to the base claims data. All of the adjustments made to the SFY 2006 data are summarized in Appendix E.

a) Population Biased Selection

Due to the large number of rate cells, differences in the age and gender mix of the population are taken into account in the enrollment process. Enrollment is mandatory for those eligibility categories identified. No additional adjustment is needed.

b) Dual Eligibles

Dual eligibles less than 65 years of age are included in the managed care plan. A separate rate for this population has been calculated.

c) Spenddown

Medically Needy individuals with spenddown are not eligible for the managed care program. Therefore, these claims and the associated eligibles have been excluded from the data. No further adjustment is necessary.

d) Benefit Differences/Program Changes

Iowa Plan has had numerous program changes since the base year. The following table provides a description of the change and the method undertaken to adjust the rates for the change.

TABLE 5
IOWA PLAN CHANGES

Item	Change	Description and Method
1	New Community Reinvestment Services and ACT service were approved (effective 1/06). Note: ACT became State Plan service as of July 1, 2007.	The new community reinvestment services are Self-Directed Care, Co-Occurring Disorders, and Child Health Specialty Clinics. A cost impact (\$1,053,995) was provided by the PIHP and the State and was added to the trend-adjusted historical costs for community reinvestment services. The costs were allocated to the rate cells according to the SFY 2006 paid amounts for each cell. Note – in the June 25, 2007 report, Council Bluffs ACT was included in this adjustment. As of SFY 2008, ACT has become a State Plan. Therefore the Council Bluffs ACT amount (\$548,000) has been included as a Non B(3) adjustment.
2	Provider increases (3/06)	A 3% provider cost increase was provided in March 2006 that was not yet fully reflected in the encounter data. An average charge trend of 3% was assumed (see trend section below.)

3	Expansion of diagnostic services (9/06).	The PIHP expanded diagnostic services to provide assessments for persons who requested remedial services (although the remedial services themselves are not covered). A cost impact (\$2,062,320) was provided by the PIHP and the State and allocated to the rate cells based on the distribution of amounts paid in SFY 2006 for CPT code 90801 – Psychiatric diagnostic interview examination.
4	“LPHAs” involvement in family meetings (11/06).	Related to 3 above, licensed practitioners of the healing arts (LPHAs) who perform these diagnostic services will be involved in family meetings for some of the children. A cost impact (\$320,000) was provided by the PIHP and the State and allocated to the child rate cells based on the amounts paid for CPT code 90899 – Unlisted psychiatric service or procedure
5	Change in Foster Care age limit (7/06).	A new coverage group was added to provide coverage to Foster Care children up to age 22 who would otherwise have aged out of the system at 18. Upon review of the experience, costs for foster care children generally increase by age through ages 16-17. Discussion with the PIHP and the State indicated that these new children are expected to have costs similar to the 16-17 year olds. Foster Care children aged 16-17 years old appear to have costs that are greater than the average Foster Care rate for children aged 10-22 years old. According to the State, there are approximately 92 of these children as of November 2006 and it appears to be increasing by 15 children per month. This information was used to estimate that the Foster Care age 10-22 rates should be adjusted 0.9% to account for an increase in the expected number of these higher than average cost individuals.
6	Legislated payment increases to CMHCs, psychiatrists, and mental health hospitalizations (10/06).	Payments to CMHCs, psychiatrists, and hospital costs for mental health hospitalizations are to be made at 100% of cost. Cost impacts were provided by the PIHP and the State. The estimates were \$2,782,934 for CMHCs, \$706,991 for psychiatrists, and \$6,185,161 for inpatient hospitalizations. The increases for CMHCs and psychiatrists were allocated to the rate cells based on amounts paid with a provider type of CMHC and Physician, M.D., respectively. The increases for hospitalizations were allocated to the rate cells based on the sum of amounts paid with a service type of either Inpatient – MH or Level IV – Inpatient – SA. The increase for hospitalizations represented an increase to the inpatient costs of approximately 40%.

e) Administrative Cost Allowance

The PIHP contract includes a 13.8% of premium administrative cost allowance. The adjustment factor applied to claims of 116.01% is calculated as $1/(1-0.138)$. This adjustment is shown on Appendix E.

f) Special Populations

No adjustment is made as the population has not significantly changed since the base year. The large number of rate cells mitigates the effect of utilization differences within the population.

g) Eligibility Adjustments

It is our understanding that the eligibility data provided to us already reflects all retrospective eligibility as well as any other adjustments necessary for the member months to parallel the appropriate time period.

h) DSH/GME/IME

Medical education payments and disproportionate share hospital payments have been excluded from the encounter data.

i) Third Party Liability

Because the cost field in the encounter data is net of TPL, no adjustment is necessary. The PIHP is responsible for collecting the TPL payments. The PIHP requires an Explanation of Benefits prior to payment. Should the PIHP receive a TPL payment after their payment, the data is readjusted to reflect the PIHP's cost.

j) Copayments, Coinsurance and Deductibles

The managed care program does not have any cost-sharing so none would be included in the encounter data. No adjustment is made.

k) FQHC and RHC Reimbursement

This is not applicable. No adjustment is necessary.

l) Utilization Adjustment and Cost Trending/Inflation

Trend adjustments were made to the base data to account for changes in price and utilization patterns including intensity, mix of service and technology. Trend adjustments for adjusting the base data from SFY 2006 to the rating period were made based on experience, historical and projected trends as calculated by Milliman's internal data sources, and information provided by the State.

Linear regression on the monthly encounter data for SFY 2005 – SFY 2006 was performed to determine the historical annual utilization trend rates of 1.1%. This calculation was done before any claims were removed due to eligibility, diagnosis, or age restrictions because the mass adjustments would be flagged as ineligible due to the fact that they are not tied to an individual. This issue is immaterial to the SFY 2006 experience but is material to the SFY 2005 experience because there were many more mass adjustments made to the SFY 2005 experience. The figure above includes an adjustment to account for changes in the population distribution among the rate cells between SFY 2005 and SFY 2006.

Only State Plan services were used in this calculation. The trend rate for B(3) services was limited to the trend for State Plan services plus Wraparounds because the calculated rate would have been higher. This State Plan plus Wraparounds trend is greater than the State Plan services only trend rate for a portion of the trending period (see Appendix E). Based on information provided by the State, an additional 3% was added to the trend factor to account for legislated price increases between SFY 2006 and the October 1, 2006 – June 30, 2007 rating period. Based on information provided by the State, no legislated price increases are expected for SFY 2008. This was comparable to the average cost trend calculated from the encounter data.

The resulting trends used in the actuarial model are shown in Appendix E.

m) Post-Eligibility Treatment of Income

This does not affect Iowa's managed care program. No adjustment has been made.

n) Claims Completion Factor

A claim completion factor of 1.017 was derived from a claim triangulation matrix (run-off method) developed for claims incurred prior to the end of SFY 2006 and paid after October 2006.

o) Other Adjustments

i) Payments and recoupments outside the MMIS system

There have not been any significant payments or recoupments made outside the MMIS system. Therefore, no adjustment has been made.

ii) Certified match

This does not affect Iowa's managed care program. No adjustment has been made.

iii) Pharmacy rebates

Pharmaceutical drugs are not included in the managed care plan. Therefore, no adjustment has been made.

iv) Investment income

No adjustment is made.

v) Managed care adjustment

This adjustment was made to the base year data to reflect the effect of healthcare management. The managed care adjustments are based on information in the Guidelines.

We have set the range of actuarially sound capitation rates using three sets of managed care adjustments. The rates at the lower end of the range assume a higher DOHM (55%). The rates at the higher end of the range assume a lower DOHM (35%). The midpoint of the rate range uses the current level of management inherent in the encounter data, which we assume to be 45%.

vi) Financial experience adjustment

Medicaid revenues and expenses as stated in the year-end 2004, 2005, and 2006 financial statement for the Iowa Medicaid PIHP were reviewed. The Medicaid business appears to be moderately profitable. No adjustment is necessary.

vii) PCCM case-management fee deduction

Since there is no PCCM program, no adjustment is necessary.

p) Reinsurance

The PIHP is a limited service organization (LSO) in the state of Iowa. The LSO status is monitored and reviewed by the Iowa Department of Commerce, Division of Insurance. Iowa Administrative Rules require LSOs to maintain an insolvency plan. According to the plan, the LSO must maintain significant positive equity. The solvency requirements are included in the PIHP contract with the State.

q) Community Reinvestment

An adjustment was made to account for the amount of the Community Reinvestment Fund expenses. After removing community reinvestment claims from the encounter data, an

adjustment was made in Appendix C to allow for the actual dollars spent in SFY 2006. An adjustment was also made for newly approved community reinvestment services (see Table 5). Note, the ACT CR services were moved to State Plan as of July 1, 2007. Therefore, the ACT CR costs have been included in the State Plan rate calculation.

r) Smoothing

The SFY 2006 encounter data was reviewed to determine if any large claims by a single individual were distorting the experience. No unexpectedly large claims were found in the SFY 2006 data. Some large claims were found in the SFY 2005 data, although these are attributed to the mass adjustments referred to above.

Appendix A

SFY 2006 Historical Experience – Aggregate Data

Appendix A - Historical Experience - Total Amount Paid

SFY 2006 Experience

Non-Community Reinvestment Claims only

B3/Other B3	Service Category	Dual		FMAP				Foster Care				NA	SSI				Grand Total	Grand Tot Excl NA		
		Ages 00 - 64		Ages 00 - 17		Ages 18 - 64		Ages 00 - 09		Ages 10 - 22			Ages 00 - 17		Ages 18 - 64					
		F	M	F	M	F	M	F	M	F	M		F	M	F	M				
Non-B3	23 Hour Observation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
	ACT/PACT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Clozapine Labs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Community Support Services	873,260	826,322	0	0	0	0	69,197	16,792	0	0	0	0	0	0	613,173	316,103	2,716,289	2,716,289	
	Day Treatment	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Emergency Transportation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Home Based Care	36,551	27,545	0	0	1,375	104	0	0	0	0	0	0	0	0	6,424	80,924	80,924	80,924	
	Home Psych Nursing	242,045	231,882	2,329	2,810	13,865	3,136	0	0	546	4,185	0	662	2,571	185,717	87,067	776,813	776,813		
	Inpatient - MH	150	65	0	0	0	0	0	0	0	0	0	0	0	0	57	333	333	333	
	Intensive Outpatient	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Intensive Psych Rehab	617,027	490,721	0	0	38,724	14,066	0	0	2,722	1,774	0	0	0	0	354,131	235,463	1,754,627	1,754,627	
	Level I - Outpatient - SA	5,185	3,827	0	0	1,840	0	0	0	0	0	0	0	0	0	2,448	13,300	13,300	13,300	
	Level II - Intensive Out Patient - SA	113	0	0	0	3,547	0	0	0	0	8,531	200	0	550	1,850	45,733	16,570	1,220,109	1,220,109	
	Level III.1 - Halfway House - SA	40,508	35,927	16,204	16,450	1,016,652	20,936	0	0	8,531	200	0	7,930	19,457	170,520	97,257	3,795,760	3,795,760	3,795,760	
	Level III.1/III.3 - Primary Extended - SA	117,504	98,802	227,772	278,143	2,395,386	257,222	0	3,840	53,731	68,196	0	0	0	0	10,897	13,036	83,192	83,192	
	Level III.7 - Med Monitored Residential - SA	5,607	6,909	2,300	3,115	31,154	10,175	0	0	0	0	0	0	0	0	0	0	0	0	0
	Level IV - Inpatient - SA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Mobile Crisis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Non-Emergency Transportation	125,692	140,417	2,573	3,151	4,282	170	100	750	1,100	5,161	0	1,600	2,577	68,283	44,590	400,445	400,445	400,445	400,445
	Outpatient	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Partial Hospitalization	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	PMIC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Residential	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Respite	12,586	10,301	0	9,920	1,029	0	2,880	44,291	116,992	83,520	0	2,080	5,440	35	165	266,352	266,352	266,352	266,352
	Subacute	250	4,080	0	1,250	283	0	0	0	0	255	0	0	0	0	3,592	2,915	31,182	31,182	31,182
	Targeted Case Management	12,989	460	5,390	13,503	19,222	4,750	6,044	46,516	200,349	210,974	0	1,622	6,801	39,058	30,710	589,269	589,269	589,269	589,269
	Mobile Counseling	0	0	0	0	920	0	0	0	0	0	60	0	0	0	1,552	205	16,195	16,195	16,195
	B3 Total		2,089,477	1,877,257	256,567	328,342	3,597,477	327,349	9,024	95,398	384,892	374,846	0	14,444	38,896	1,501,472	853,012	11,748,451	11,748,451	11,748,451
	Non-B3		41,832	35,466	91,745	122,427	144,949	33,826	5,645	7,436	15,946	16,688	0	9,456	26,395	74,043	39,928	665,783	665,783	665,783
		23 Hour Observation	0	0	7,823	9,896	14,450	7,916	315	315	4,296	2,531	0	1,419	2,130	11,220	17,868	76,868	76,868	76,868
		ACT/PACT	690,085	897,310	0	0	14,216	3,466	0	0	0	1,050	0	0	0	258,819	379,807	2,244,773	2,244,773	2,244,773
		Clozapine Labs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		Community Support Services	0	655	0	0	0	0	0	0	0	0	0	0	0	0	655	655	655	655
	Day Treatment	19,970	28,854	21,081	209,438	42,777	4,788	7,718	24,881	19,756	51,100	0	6,180	87,315	46,099	15,767	585,724	585,724	585,724	
	Emergency Transportation	2,972	5,610	44,880	44,346	120,821	31,466	3,346	6,765	35,615	37,978	0	9,430	28,345	184,376	132,859	692,010	692,010	692,010	
	Home Based Care	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Home Psych Nursing	0	0	0	156	405	0	0	0	0	0	0	0	0	0	0	618	618	618	
	Inpatient - MH	48,583	139,323	1,195,556	1,086,069	1,931,679	707,049	122,641	313,347	1,028,703	1,066,958	0	292,554	601,470	3,688,705	2,828,306	15,051,943	15,051,943	15,051,943	
	Intensive Outpatient	8,272	3,331	113,761	245,562	35,262	10,002	25,120	23,448	26,169	34,888	0	29,879	87,024	41,391	7,080	691,209	691,209	691,209	
	Intensive Psych Rehab	88	0	0	0	0	0	0	0	0	0	0	0	0	54	0	142	142	142	
	Level I - Outpatient - SA	98,773	168,963	147,128	239,622	1,230,857	311,595	234	28	86,345	127,115	0	1,715	17,884	173,099	170,136	2,773,494	2,773,494	2,773,494	
	Level II - Intensive Out Patient - SA	65,750	69,791	152,910	215,752	1,063,951	167,735	0	0	57,248	68,775	0	395	18,964	152,015	74,851	2,108,137	2,108,137	2,108,137	
	Level III.1 - Halfway House - SA	0	0	1,215	225	1,250	0	0	0	0	0	0	0	0	1,150	0	3,840	3,840	3,840	
	Level III.1/III.3 - Primary Extended - SA	0	0	100	176	4,674	541	0	502	337	277	0	0	0	808	141	7,556	7,556	7,556	
	Level III.7 - Med Monitored Residential - SA	0	0	0	473	1,105	108	0	0	3,780	1,418	0	1,418	2,363	70	10,733	10,733	10,733	10,733	
	Level IV - Inpatient - SA	0	1,845	31,556	22,601	163,701	91,351	0	4,509	6,258	8,053	0	4,571	2,669	103,228	122,710	558,544	558,544	558,544	
	Mobile Crisis	8,106	7,374	18,682	22,333	12,854	4,254	1,836	4,509	15,026	14,142	0	3,030	10,385	25,212	21,343	169,085	169,085	169,085	
	Non-Emergency Transportation	0	269	202	202	589	174	0	27	620	72	0	30	1,066	632	147	3,944	3,944	3,944	
	Outpatient	634,725	555,975	3,303,224	4,165,917	2,887,578	534,409	430,099	519,854	1,024,395	1,103,482	0	392,311	952,740	2,887,207	1,319,504	20,711,419	20,711,419	20,711,419	
	Partial Hospitalization	19,195	11,767	149,465	268,043	74,380	22,746	16,058	31,697	62,773	38,329	0	20,383	122,912	88,661	28,835	955,244	955,244	955,244	
	PMIC	0	0	42,244	55,564	0	0	0	0	825,107	1,186,769	0	2,601	1,580	0	0	2,113,864	2,113,864	2,113,864	
	Residential	0	0	2,066	140	1,136	0	111	5,736	22,735	18,722	0	109	426	141	200	51,522	51,522	51,522	
	Respite	0	0	0	0	0	0	0	0	340	0	0	0	0	0	566	2,038	2,038	2,038	
	Subacute	0	1,132	925	1,359	1,547	816	790	7,617	29,762	78,718	0	170	3,502	9,886	10,772	147,558	147,558	147,558	
	Targeted Case Management	2,628,699	2,918,395	0	0	159,942	33,202	0	0	10,539	14,450	0	0	0	1,727,235	1,168,369	8,660,831	8,660,831	8,660,831	
	Mobile Counseling	2,448	1,235	7,153	7,144	8,674	3,135	655	655	785	1,344	0	1,985	2,127	11,083	4,185	51,952	51,952	51,952	
Non-B3 Total		4,269,554	4,848,760	5,329,718	6,719,390	7,916,798	1,968,739	613,914	946,617	3,279,735	3,872,860	0	777,634	1,969,297	9,468,468	6,337,487	58,339,487	58,339,487	58,339,487	
Grand Total		6,359,030	6,726,037	5,586,284	7,047,732	11,514,275	2,296,088	622,937	1,042,215	3,684,627	4,247,706	0	792,078	2,008,193	10,869,940	7,190,795	70,087,938	70,087,938	70,087,938	
Member Months		163,063	156,792	917,442	937,320	526,969	153,625	27,778	30,891	39,470	43,993	0	37,516	66,027	157,406	113,936	3,372,228	3,372,228	3,372,228	

Appendix A - Historical Experience - Utilization Counts
 SFY 2006 Experience
 Non-Community Reinvestment Claims only

B3/Other	Service Category	Dual		FMAP				Foster Care				NA	SSI				Grand Total	Grand Tot Excl NA
		Ages 00 - 64		Ages 00 - 17		Ages 18 - 64		Ages 00 - 09		Ages 10 - 22			Ages 00 - 17		Ages 18 - 64			
		F	M	F	M	F	M	F	M	F	M		F	M	F	M		
B3	23 Hour Observation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	ACT/PACT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Clozapine Labs	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Community Support Services	7,152	6,957	0	0	578	134	0	0	6	7	0	0	0	5,037	2,698	22,469	22,469
	Day Treatment	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Emergency Transportation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Home Based Care	742	533	0	0	25	2	0	0	0	0	0	0	4	186	146	1,638	1,638
	Home Psych Nursing	4,165	4,088	34	43	222	58	0	0	8	57	0	11	35	3,202	1,470	13,393	13,393
	Inpatient - MH	3	1	0	0	0	0	0	0	0	0	0	0	0	1	6	6	6
	Intensive Outpatient	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Intensive Psych Rehab	5,647	5,712	0	0	398	182	0	0	38	22	0	0	0	3,749	2,582	18,330	18,330
	Level I - Outpatient - SA	16	7	0	0	4	0	0	0	0	0	0	0	0	0	6	33	33
	Level II - Intensive Out Patient - SA	1	0	0	0	32	0	0	0	0	0	0	0	0	0	0	33	33
	Level III.1 - Halfway House - SA	122	62	51	52	5,438	136	0	0	23	1	0	2	6	165	26	6,084	6,084
	Level III.5/III.3 - Primary Extended - SA	224	242	146	194	2,230	385	0	1	43	57	0	10	19	330	125	4,006	4,006
	Level III.7 - Med Monitored Residential - SA	12	16	7	6	88	34	0	0	0	0	0	0	0	34	53	250	250
	Level IV - Inpatient - SA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Mobile Crisis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Non-Emergency Transportation	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Outpatient	2,918	3,795	82	87	132	6	4	13	19	77	0	10	80	1,402	837	9,462	9,462
	Partial Hospitalization	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	PMIC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Residential	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Respite	44	50	0	3	2	0	3	20	89	59	0	2	4	1	14	130	190
	Subacute	1	1	5	6	23	5	5	15	100	56	0	4	4	41	25	291	291
	Targeted Case Management	58	1	0	0	2	0	0	0	0	0	2	0	0	8	1	72	72
	Mobile Counseling	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
B3 Total		21,105	21,465	325	400	9,175	942	12	49	327	338	0	39	152	14,173	7,885	76,387	76,387
Non-B3	23 Hour Observation	1,677	1,425	3,675	4,903	5,619	1,357	226	297	638	689	0	377	1,055	2,969	1,604	26,691	26,691
	ACT/PACT	0	0	24	32	48	25	1	1	15	8	0	5	8	52	36	255	255
	Clozapine Labs	641	836	0	0	14	3	0	0	0	0	0	0	0	243	353	2,091	2,091
	Community Support Services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Day Treatment	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2	2	2
	Emergency Transportation	138	221	15	144	98	19	5	20	18	42	0	4	59	124	85	992	992
	Home Based Care	3	8	85	70	182	48	5	12	69	67	0	19	39	291	220	1,118	1,118
	Home Psych Nursing	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Inpatient - MH	0	0	0	1	1	0	0	0	0	0	0	0	0	0	3	3	3
	Inpatient - MH	99	147	3,292	2,827	5,473	1,928	242	631	2,144	2,143	0	657	1,617	9,469	7,104	37,773	37,773
	Intensive Outpatient	25	13	887	1,167	90	26	57	151	171	233	0	188	525	206	33	3,782	3,782
	Intensive Psych Rehab	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3
	Level I - Outpatient - SA	2,061	3,434	3,075	4,946	27,175	6,327	5	1	1,868	2,872	0	43	363	3,539	3,266	58,975	58,975
	Level II - Intensive Out Patient - SA	459	241	909	934	5,329	728	0	0	365	360	0	1	90	1,007	252	10,675	10,675
	Level III.1 - Halfway House - SA	0	0	1	3	2	0	0	0	0	0	0	0	0	1	0	7	7
	Level III.1.1 - Halfway House - SA	0	0	1	3	18	10	0	1	1	1	0	0	0	11	4	50	50
	Level III.5/III.3 - Primary Extended - SA	0	0	0	0	4	3	0	0	3	1	0	1	2	2	0	17	17
	Level III.7 - Med Monitored Residential - SA	0	0	75	67	558	321	0	0	15	12	0	7	14	324	449	1,850	1,850
	Level IV - Inpatient - SA	0	8	123	146	85	28	12	30	99	92	0	20	67	168	142	1,115	1,115
	Mobile Crisis	54	49	123	146	85	28	12	30	99	92	0	20	67	168	142	1,115	1,115
	Non-Emergency Transportation	2	2	11	11	24	9	0	1	2	3	0	1	5	26	7	103	103
	Outpatient	12,385	11,497	62,416	79,932	52,378	9,552	8,413	10,110	20,510	22,661	0	7,945	19,626	54,418	26,020	397,863	397,863
	Partial Hospitalization	41	22	326	514	313	62	22	46	116	63	0	46	206	210	73	2,060	2,060
	PMIC	0	0	20	21	8	0	0	0	183	292	0	1	1	4	0	518	518
	Residential	0	0	0	10	0	4	1	14	49	37	0	1	2	4	2	132	132
	Respite	0	0	0	0	0	0	0	0	1	59	0	0	0	0	0	7	7
	Subacute	0	4	4	4	4	3	4	15	39	59	0	1	5	6	6	171	171
	Targeted Case Management	9,888	11,003	63	72	579	124	0	0	0	0	0	0	0	6,363	4,301	32,356	32,356
	Mobile Counseling	27	11	0	0	0	25	0	6	7	12	0	23	23	117	37	499	499
Non-B3 Total		27,501	28,925	75,012	95,808	98,278	20,602	8,993	11,336	26,371	29,687	0	9,340	23,707	79,551	43,997	579,108	579,108
Grand Total		48,606	50,390	75,337	96,208	107,453	21,544	9,005	11,365	26,698	30,025	0	9,379	23,859	93,724	51,882	655,495	655,495
Member Months		163,063	156,792	917,442	937,320	526,969	153,625	27,778	30,891	39,470	43,993	0	37,516	66,027	157,406	113,936	3,372,228	3,372,228

Appendix B

SFY 2006 Historical Experience – Cost Model

Appendix B - Historical Experience - Utilization per 1,000
SFY 2006 Experience
Non-Community Reinvestment Claims only

B3/Other B3	Service Category	Dual		Ages 00 - 17		FMAP		Ages 18 - 64		Ages 00 - 09		Foster Care		NA	Ages 00 - 17		Ages 18 - 64		Grand Total	Grand Tot Excl NA
		F	M	F	M	F	M	F	M	F	M	F	M		F	M				
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
526	532	526	532	0	0	0	0	13	10	0	0	2	2	0	0	0	384	274	80	80
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	41	55	41	0	0	0	0	1	0	0	0	0	0	0	0	0	14	15	6	6
307	313	307	313	0	0	0	0	5	5	0	0	2	16	0	4	6	244	155	48	48
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
416	437	416	437	0	0	0	0	9	14	0	0	12	6	0	0	0	286	272	65	65
1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	5	9	5	1	1	1	1	124	11	0	0	7	0	0	1	1	13	3	22	22
16	19	16	19	2	2	2	30	51	30	0	0	13	16	0	3	3	25	13	14	14
1	1	1	1	0	0	0	0	2	3	0	0	0	0	0	0	0	3	6	1	1
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
215	290	215	290	1	1	1	3	0	0	2	5	6	21	0	3	15	107	88	34	34
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3	4	3	4	0	0	0	0	0	0	1	8	27	16	0	1	1	0	0	1	1
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0
0	0	0	0	0	0	0	0	1	0	2	6	30	15	0	1	1	3	3	1	1
4	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1,553	1,643	1,553	1,643	4	5	63	74	209	106	5	19	99	92	0	12	28	1,080	830	272	272
123	109	123	109	48	63	133	106	133	106	98	115	194	182	0	121	192	226	169	95	95
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	4	1	1
47	64	47	64	0	0	0	0	0	0	0	0	0	0	0	0	0	19	37	7	7
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	17	10	17	0	0	0	0	2	1	2	8	5	11	0	1	11	9	9	4	4
0	0	0	0	1	1	1	4	2	4	2	5	21	18	0	6	7	22	23	4	4
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	11	7	11	43	36	125	151	105	105	245	59	652	585	0	210	294	722	748	134	134
2	1	2	1	12	15	15	2	25	59	0	0	52	64	0	60	95	16	3	13	13
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
152	263	152	263	40	63	619	494	2	0	2	0	568	783	0	14	66	270	344	210	210
34	18	34	18	12	12	121	57	0	0	0	0	111	98	0	0	16	77	27	38	38
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	1	1	13	25	0	1	0	0	5	3	0	2	3	25	47	7	7
4	4	4	4	2	2	2	2	5	12	0	12	30	25	0	6	12	13	15	4	4
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	0	0
911	880	911	880	816	1,023	1,193	746	3,634	3,927	6,236	6,181	6,236	6,181	0	2,541	3,567	4,149	2,740	1,416	1,416
3	2	3	2	4	7	7	5	10	18	0	18	35	17	0	15	37	16	8	7	7
0	0	0	0	0	0	0	0	0	0	0	0	56	80	0	0	0	0	0	2	2
0	0	0	0	0	0	0	0	0	0	0	5	15	10	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	2	6	1	6	18	16	0	0	1	0	1	1	1
728	842	728	842	0	0	0	0	0	0	0	0	0	0	0	0	0	485	453	115	115
2	1	2	1	1	1	1	2	0	2	0	2	12	16	0	7	4	9	4	2	2
2,024	2,214	2,024	2,214	981	1,227	2,238	1,609	3,885	4,404	8,018	8,098	8,018	8,098	0	2,988	4,309	6,065	4,634	2,081	2,081
3,577	3,857	3,577	3,857	985	1,232	2,447	1,683	3,890	4,423	8,117	8,190	8,117	8,190	0	3,000	4,336	7,145	5,464	2,333	2,333
163,063	156,792	163,063	156,792	917,442	937,320	526,969	153,625	27,778	30,891	39,470	43,993	39,470	43,993	0	37,516	66,027	157,406	113,936	3,372,228	3,372,228
Member Months																				

Appendix B - Historical Experience - Average Charge

SFY 2006 Experience
Non-Community Reinvestment Claims only

B3/Other B3	Service Category	Dual		FMAP				Foster Care				Ages 18 - 64		Ages 00 - 17				SSI				Grand Total	Grand Tot Excl NA
		Ages 00 - 64		Ages 18 - 64		Ages 00 - 09		Ages 10 - 22		Ages 00 - 17		Ages 18 - 64		Ages 00 - 17		Ages 18 - 64							
		F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M						
B3	23 Hour Observation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	ACT/PACT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Clozapine Labs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Community Support Services	122.10	118.78	0.00	0.00	0.00	0.00	119.72	125.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	121.67	120.89	
	Day Treatment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Emergency Transportation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Home Based Care	49.26	51.68	0.00	0.00	55.00	52.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Home Psych Nursing	58.11	56.72	68.49	65.35	62.46	54.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Inpatient - MH	50.00	65.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Intensive Outpatient	109.27	85.91	0.00	0.00	97.30	77.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	91.19	95.72	
	Intensive Psych Rehab	324.06	546.71	0.00	0.00	460.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	408.00	403.03	
	Level I - Outpatient - SA	113.00	0.00	0.00	0.00	110.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	110.91	110.91	
	Level II - Intensive Out Patient - SA	332.03	579.46	317.72	316.35	186.95	153.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	637.31	200.54	
	Level III.1 - Halfway House - SA	524.57	408.27	1,560.08	1,433.73	1,074.16	668.11	0.00	3,840.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	516.73	778.05	
	Level III.7 - Med Monitored Residential - SA	467.25	431.78	328.57	519.17	354.03	299.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	245.96	332.77	
	Level IV - Inpatient - SA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Mobile Crisis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Non-Emergency Transportation	43.07	37.00	31.38	36.22	32.44	28.33	25.00	57.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53.27	42.32	
	Outpatient	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Partial Hospitalization	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	PMIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Residential	286.05	206.02	0.00	0.00	1,102.22	514.39	0.00	980.00	2,214.57	1,314.52	1,415.59	0.00	1,040.00	1,360.00	35.00	165.00	0.00	0.00	0.00	0.00	1,401.85	
	Respite	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Subacute	250.00	4,080.00	1,078.00	2,250.52	835.75	950.00	0.00	1,208.72	3,101.09	2,003.49	3,767.39	0.00	405.59	1,700.23	0.00	239.86	0.00	0.00	0.00	2,024.98	2,024.98	
	Targeted Case Management	224.12	460.00	0.00	0.00	460.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	224.94	0.00	0.00	0.00	224.94	224.94	
	Mobile Counseling	99.00	87.46	789.44	820.85	392.10	347.50	751.97	1,946.89	1,177.04	1,103.01	0.00	370.37	255.89	105.94	108.18	153.80	0.00	0.00	0.00	153.80	153.80	
	B3 Total Non-B3	23 Hour Observation	24.94	24.89	24.96	24.97	24.91	24.93	24.98	25.04	24.99	24.95	0.00	25.08	25.02	24.94	24.89	0.00	0.00	0.00	24.94	24.94	
ACT/PACT		1,076.58	1,073.34	325.97	309.26	316.62	315.00	286.39	316.36	0.00	0.00	0.00	263.80	266.22	279.93	311.68	0.00	0.00	0.00	1,073.54	301.44		
Clozapine Labs		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Community Support Services		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Day Treatment		144.71	130.56	1,405.41	1,454.43	436.50	252.00	0.00	1,543.60	1,244.05	1,097.56	1,216.67	0.00	1,545.00	0.00	0.00	0.00	0.00	0.00	371.76	185.49		
Emergency Transportation		990.67	701.28	528.00	633.52	663.85	655.55	569.17	563.77	562.54	566.84	0.00	496.33	726.79	633.59	603.90	0.00	0.00	0.00	618.97	618.97		
Home Based Care		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Home Psych Nursing		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Inpatient - MH		490.73	947.77	363.17	384.18	352.95	366.73	367.81	496.59	479.81	497.88	0.00	445.29	371.97	389.56	398.27	0.00	0.00	0.00	398.48	398.48		
Intensive Outpatient		330.87	256.20	126.82	210.44	391.80	384.69	0.00	440.71	155.29	153.03	149.73	0.00	158.93	165.76	200.93	214.55	182.76	0.00	182.76	182.76		
Intensive Psych Rehab		87.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Level I - Outpatient - SA		47.92	49.20	47.85	48.45	45.29	49.25	46.89	28.15	46.22	44.26	0.00	39.89	49.27	48.91	52.09	47.03	47.03	0.00	47.03	47.03		
Level II - Intensive Out Patient - SA		143.25	289.59	168.22	231.00	199.65	230.41	0.00	0.00	0.00	0.00	0.00	395.00	210.71	150.96	297.03	197.48	197.48	0.00	197.48	197.48		
Level III.1 - Halfway House - SA		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Level III.7 - Med Monitored Residential - SA		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Level IV - Inpatient - SA		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Mobile Crisis		150.11	150.49	151.89	152.96	151.22	151.93	153.00	150.30	151.78	153.72	0.00	151.50	154.99	150.07	150.30	151.65	151.65	0.00	151.65	151.65		
Non-Emergency Transportation		28.00	30.11	24.44	18.33	24.53	19.33	27.38	620.00	0.00	0.00	0.00	30.00	213.28	24.29	21.05	38.29	38.29	0.00	38.29	38.29		
Outpatient		51.25	48.36	52.92	52.12	55.13	55.95	51.42	51.42	49.95	48.70	0.00	49.38	48.54	53.06	50.71	52.06	52.06	0.00	52.06	52.06		
Partial Hospitalization		468.18	534.86	458.48	521.49	237.63	366.88	729.91	0.00	0.00	0.00	0.00	443.10	596.66	422.19	395.00	463.71	463.71	0.00	463.71	463.71		
PMIC		0.00	0.00	2,112.18	2,645.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,600.64	1,580.00	0.00	0.00	0.00	0.00	0.00	0.00	4,080.82	4,080.82	
Residential		0.00	0.00	0.00	0.00	142.06	35.00	0.00	110.61	409.72	463.98	506.00	0.00	108.59	213.23	35.25	100.00	390.32	0.00	390.32	390.32		
Respite		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	291.14	291.14	
Subacute		0.00	0.00	231.18	339.75	366.68	272.00	197.57	507.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,975.29	862.91	0.00	862.91	862.91		
Targeted Case Management		265.85	265.24	0.00	0.00	267.24	267.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	271.45	267.67	0.00	267.67	267.67		
Mobile Counseling	90.67	112.27	113.54	98.22	114.13	125.40	109.17																

Appendix B - Historical Experience - PMPM

SFY 2006 Experience
Non-Community Reinvestment Claims only

B3/Other B3	Service Category	Dual		FMAP		Ages 00 - 17		Ages 18 - 64		Foster Care		NA	Ages 00 - 17		Ages 18 - 64		Grand Total	Grand Tot Excl NA
		F	M	F	M	F	M	F	M	F	M		F	M				
B3	23 Hour Observation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	ACT/PACT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Clozapine Labs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Community Support Services	5.36	5.27	0.00	0.00	0.00	0.00	0.00	0.11	0.13	0.00	0.00	0.00	0.00	0.00	3.90	2.77	0.81
	Day Treatment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Emergency Transportation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Home Based Care	0.22	0.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Home Psych Nursing	1.48	1.48	0.00	0.00	0.00	0.00	0.00	0.03	0.02	0.00	0.00	0.00	0.00	0.00	1.18	0.76	0.23
	Inpatient - MH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Intensive Outpatient	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Intensive Psych Rehab	3.78	3.13	0.00	0.00	0.00	0.00	0.00	0.07	0.09	0.00	0.00	0.00	0.00	0.00	2.25	2.07	0.52
	Level I - Outpatient - SA	0.03	0.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.02	0.00
	Level II - Intensive Out Patient - SA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Level III.1 - Halfway House - SA	0.25	0.23	0.02	0.02	1.93	0.14	0.00	0.00	0.00	0.00	0.00	0.00	0.01	0.03	0.29	0.15	0.36
	Level III.5/III.3 - Primary Extended - SA	0.72	0.63	0.25	0.30	4.55	1.67	0.00	0.00	0.06	0.07	0.00	0.00	0.21	0.29	1.08	0.85	1.13
	Level III.7 - Med Monitored Residential - SA	0.03	0.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.07	0.11	0.02
	Level IV - Inpatient - SA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Mobile Crisis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Non-Emergency Transportation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Outpatient	0.77	0.90	0.00	0.00	0.00	0.00	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Partial Hospitalization	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	PMIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10	1.43	2.96	0.06	0.08	0.00	0.00	0.08
	Residential	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Respite	0.08	0.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.02	0.03	0.01
	Subacute	0.00	0.03	0.01	0.01	0.04	0.03	0.22	1.51	5.08	0.00	4.80	0.00	0.04	0.10	0.25	0.27	0.17
	Targeted Case Management	0.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Mobile Counseling	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
B3 Total		12.81	11.97	0.28	0.35	6.83	2.13	0.32	3.09	9.75	8.52	0.00	0.39	0.59	9.54	7.49	3.48	3.48
Non-B3		0.26	0.23	0.10	0.13	0.28	0.22	0.20	0.24	0.40	0.38	0.00	0.25	0.40	0.47	0.35	0.20	0.20
Non-B3	23 Hour Observation	0.00	0.00	0.01	0.01	0.03	0.05	0.01	0.01	0.11	0.06	0.00	0.04	0.03	0.09	0.10	0.02	0.02
	ACT/PACT	4.23	5.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.67	0.67
	Clozapine Labs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Community Support Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Day Treatment	0.12	0.18	0.02	0.22	0.08	0.03	0.28	0.81	0.50	1.16	0.00	0.16	1.32	0.29	0.14	0.17	0.17
	Emergency Transportation	0.02	0.04	0.05	0.05	0.23	0.20	0.12	0.22	0.98	0.86	0.00	0.25	0.43	1.17	1.17	0.21	0.21
	Home Based Care	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Home Psych Nursing	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Inpatient - MH	0.30	0.89	1.30	1.16	3.67	4.60	4.42	10.14	26.06	24.25	0.00	7.80	9.11	23.43	24.83	4.46	4.46
	Intensive Outpatient	0.05	0.02	0.12	0.26	0.07	0.07	0.90	0.76	0.66	0.79	0.00	0.80	1.32	0.26	0.06	0.20	0.20
	Intensive Psych Rehab	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Level I - Outpatient - SA	0.61	1.08	0.16	0.26	2.34	2.03	0.01	0.00	2.19	2.89	0.00	0.05	0.27	1.10	1.49	0.82	0.82
	Level II - Intensive Out Patient - SA	0.40	0.45	0.17	0.23	2.02	1.09	0.00	0.00	1.45	1.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Level III.1 - Halfway House - SA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Level III.5/III.3 - Primary Extended - SA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.04	0.04	0.00	0.00	0.00
	Level III.7 - Med Monitored Residential - SA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10	0.03	0.00	0.12	0.04	0.66	1.08	0.17	0.17
	Level IV - Inpatient - SA	0.00	0.01	0.03	0.02	0.31	0.59	0.00	0.00	0.16	0.18	0.00	0.08	0.16	0.16	0.19	0.05	0.05
	Mobile Crisis	0.05	0.05	0.02	0.02	0.02	0.03	0.07	0.15	0.38	0.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Non-Emergency Transportation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Outpatient	3.89	3.55	3.60	4.44	5.48	3.48	15.48	16.83	25.95	25.08	0.00	10.46	14.43	18.34	11.58	6.14	6.14
	Partial Hospitalization	0.12	0.08	0.16	0.29	0.14	0.15	0.58	1.03	1.59	0.87	0.00	0.54	1.86	0.56	0.25	0.28	0.28
	PMIC	0.00	0.00	0.05	0.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.63	0.63
	Residential	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.19	0.38	0.00	0.00	0.00	0.00	0.00	0.00
	Respite	0.00	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Subacute	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Targeted Case Management	16.12	18.61	0.00	0.00	0.30	0.22	0.00	0.00	0.27	0.33	0.00	0.00	0.00	10.97	10.25	2.57	2.57
	Mobile Counseling	0.02	0.01	0.01	0.01	0.02	0.02	0.00	0.00	0.02	0.02	0.03	0.00	0.05	0.03	0.07	0.04	0.02
Non-B3 Total		26.18	30.92	5.81	7.17	15.02	12.82	22.10	33.65	83.09	88.03	0.00	20.73	29.83	60.28	55.63	17.30	17.30
Grand Total		39.00	42.90	6.09	7.52	21.85	14.95	22.43	33.74	92.85	96.55	0.00	21.11	30.41	69.82	63.11	20.78	20.78
Member Months		163,063	156,792	917,442	937,320	526,969	153,625	27,778	30,891	39,470	43,993	0	37,516	66,027	157,406	113,936	3,372,228	

Appendix C
Adjustments for Community Reinvestment

Appendix C - Adjustments for Community Reinvestment

10/1/06-6/30/07 SFY 2008

Trend Trend
2.3% 1.6%
annual for annual for
13.5 10.5
months months

Community Reinvestment Expenditures
Beneficiary Services
Outreach

Base Period	Trend	Rating Period	Additional Svcs	SFY 2008 Trend	Rating Period	Rating Period Total
775,333	1.040	806,255	1,053,995	1.014	1,068,584	1,874,839
438,429	1.040	455,914	0	1.014	0	455,914

	Member Months	SFY06 Total Costs	SFY06 Base PMPM	Community Reinvestment Service Costs	Comm Rein Service Costs PMPM	Community Reinvestment Outreach/Admin	Comm Rein Outreach/Admin PMPM
B3							
Dual 00 - 64 F	163,063	\$2,089,477	\$12.81	\$333,442	\$2.04	\$81,085	\$0.50
Dual 00 - 64 M	156,792	1,877,257	\$11.97	299,576	\$1.91	72,849	\$0.46
FMAP 00 - 17 F	917,442	256,567	\$0.28	40,943	\$0.04	9,956	\$0.01
FMAP 00 - 17 M	937,320	328,342	\$0.35	52,397	\$0.06	12,742	\$0.01
FMAP 18 - 64 F	526,969	3,597,477	\$6.83	574,092	\$1.09	139,605	\$0.26
FMAP 18 - 64 M	153,625	327,349	\$2.13	52,239	\$0.34	12,703	\$0.08
Foster 00 - 09 F	27,778	9,024	\$0.32	1,440	\$0.05	350	\$0.01
Foster 00 - 09 M	30,891	95,398	\$3.09	15,224	\$0.49	3,702	\$0.12
Foster 10 - 22 F	39,470	384,892	\$9.75	61,422	\$1.56	14,936	\$0.38
Foster 10 - 22 M	43,993	374,846	\$8.52	59,819	\$1.36	14,546	\$0.33
SSI 00 - 17 F	37,516	14,444	\$0.39	2,305	\$0.06	561	\$0.01
SSI 00 - 17 M	66,027	38,896	\$0.59	6,207	\$0.09	1,509	\$0.02
SSI 18 - 64 F	157,406	1,501,472	\$9.54	239,608	\$1.52	58,267	\$0.37
SSI 18 - 64 M	113,936	853,012	\$7.49	136,125	\$1.19	33,102	\$0.29
Combined	3,372,228	11,748,451	\$3.48	1,874,839	\$0.56	455,914	\$0.14
Non-B3							
Dual 00 - 64 F	163,063	\$4,269,554	\$26.18	\$0	\$0.00	\$0	\$0.00
Dual 00 - 64 M	156,792	4,848,780	\$30.92	0	\$0.00	0	\$0.00
FMAP 00 - 17 F	917,442	5,329,718	\$5.81	0	\$0.00	0	\$0.00
FMAP 00 - 17 M	937,320	6,719,390	\$7.17	0	\$0.00	0	\$0.00
FMAP 18 - 64 F	526,969	7,916,798	\$15.02	0	\$0.00	0	\$0.00
FMAP 18 - 64 M	153,625	1,968,739	\$12.82	0	\$0.00	0	\$0.00
Foster 00 - 09 F	27,778	613,914	\$22.10	0	\$0.00	0	\$0.00
Foster 00 - 09 M	30,891	946,817	\$30.65	0	\$0.00	0	\$0.00
Foster 10 - 22 F	39,470	3,279,735	\$83.09	0	\$0.00	0	\$0.00
Foster 10 - 22 M	43,993	3,872,860	\$88.03	0	\$0.00	0	\$0.00
SSI 00 - 17 F	37,516	777,634	\$20.73	0	\$0.00	0	\$0.00
SSI 00 - 17 M	66,027	1,969,297	\$29.83	0	\$0.00	0	\$0.00
SSI 18 - 64 F	157,406	9,488,468	\$60.28	0	\$0.00	0	\$0.00
SSI 18 - 64 M	113,936	6,337,783	\$55.63	0	\$0.00	0	\$0.00
Combined	3,372,228	58,339,487	\$17.30	0	\$0.00	0	\$0.00
Total							
Dual 00 - 64 F	163,063	\$6,359,030	\$39.00	\$333,442	\$2.04	\$81,085	\$0.50
Dual 00 - 64 M	156,792	6,726,037	\$42.90	299,576	\$1.91	72,849	\$0.46
FMAP 00 - 17 F	917,442	5,586,284	\$6.09	40,943	\$0.04	9,956	\$0.01
FMAP 00 - 17 M	937,320	7,047,732	\$7.52	52,397	\$0.06	12,742	\$0.01
FMAP 18 - 64 F	526,969	11,514,275	\$21.85	574,092	\$1.09	139,605	\$0.26
FMAP 18 - 64 M	153,625	2,296,088	\$14.95	52,239	\$0.34	12,703	\$0.08
Foster 00 - 09 F	27,778	622,937	\$22.43	1,440	\$0.05	350	\$0.01
Foster 00 - 09 M	30,891	1,042,215	\$33.74	15,224	\$0.49	3,702	\$0.12
Foster 10 - 22 F	39,470	3,664,627	\$92.85	61,422	\$1.56	14,936	\$0.38
Foster 10 - 22 M	43,993	4,247,706	\$96.55	59,819	\$1.36	14,546	\$0.33
SSI 00 - 17 F	37,516	792,078	\$21.11	2,305	\$0.06	561	\$0.01
SSI 00 - 17 M	66,027	2,008,193	\$30.41	6,207	\$0.09	1,509	\$0.02
SSI 18 - 64 F	157,406	10,989,940	\$69.82	239,608	\$1.52	58,267	\$0.37
SSI 18 - 64 M	113,936	7,190,795	\$63.11	136,125	\$1.19	33,102	\$0.29
Combined	3,372,228	70,087,938	\$20.78	1,874,839	\$0.56	455,914	\$0.14

Appendix D
Adjustments Other Than Community Reinvestment

Appendix D - Adjustments Other Than Community Reinvestment

Appendix D - Adjustments Other Than Community Reinvestment														
	Base Year			Expansion of Diagnostic Services	Additional LPHA Costs	Foster Care Age Increase	New State Plan Service Council Bluffs		Legislated Payment Increases			Total		SFY 2008 Non-CR Program Changes PMPM
	Costs		ACI				Inpatient	Psychiatrists	CMHCs	Trend annual for 10.5 Months	SFY 2008	Total Adjustments for Non-CR Changes		
	Member Months	B3												
Dual 00 - 64 F	163,063	\$2,089,477	\$12.81	\$0	\$0	\$0	\$0	\$0	\$513,445	\$513,445	\$520,552	\$3.19		
Dual 00 - 64 M	156,792	1,877,257	11.97	0	0	0	0	0	572,604	572,604	\$580,529	\$3.70		
FMAP 00 - 17 F	917,442	256,567	0.28	0	0	0	0	0	2,511	2,511	\$2,546	\$0.00		
FMAP 00 - 17 M	937,320	328,342	0.35	0	0	0	0	0	7,845	\$7,954	7,845	\$0.01		
FMAP 18 - 64 F	526,969	3,597,477	6.83	0	0	0	0	0	33,339	\$33,801	\$33,801	\$0.06		
FMAP 18 - 64 M	153,625	327,349	2.13	0	0	0	0	0	9,086	\$9,212	\$9,212	\$0.06		
Foster 00 - 09 F	27,778	9,024	0.32	0	0	0	0	0	2,933	\$2,973	\$2,973	\$0.11		
Foster 00 - 09 M	30,891	95,398	3.09	0	0	0	0	0	31,140	\$31,571	\$11,020	\$1.02		
Foster 10 - 22 F	39,470	384,892	9.75	0	0	2,890	0	0	107,974	\$110,864	\$112,399	\$2.85		
Foster 10 - 22 M	43,993	374,846	8.52	0	0	2,815	0	0	111,223	\$114,038	\$115,616	\$2.63		
SSI 00 - 17 F	37,516	14,444	0.39	0	0	0	0	0	1,197	\$1,213	\$1,213	\$0.03		
SSI 00 - 17 M	66,027	38,896	0.59	0	0	0	0	0	4,692	\$4,757	\$4,757	\$0.07		
SSI 18 - 64 F	157,406	1,501,472	9.54	0	0	0	0	0	310,384	\$314,680	\$314,680	\$2.00		
SSI 18 - 64 M	113,936	853,012	7.49	0	0	0	0	0	219,379	\$222,416	\$1,950	\$1.95		
Combined	3,372,228	11,748,451	3.48	0	0	5,705	0	0	1,927,752	1,933,457	1,960,219	\$0.58		
Non-B3														
Dual 00 - 64 F	163,063	\$4,269,554	\$26.18	\$20,949	\$0	\$0	\$40,105	\$19,230	\$10,202	\$22,194	\$112,680	\$113,764	\$0.70	
Dual 00 - 64 M	156,792	4,848,780	30.92	26,571	0	0	\$45,546	55,878	9,281	22,773	160,048	161,587	\$1.03	
FMAP 00 - 17 F	917,442	5,329,718	5.81	97,440	69,735	0	\$50,064	485,863	66,992	123,999	894,092	902,691	\$0.98	
FMAP 00 - 17 M	937,320	6,719,390	7.17	134,045	0	0	\$63,117	438,872	89,169	164,284	898,487	898,042	\$0.96	
FMAP 18 - 64 F	526,969	7,916,798	15.02	293,175	0	0	\$74,365	830,080	98,324	124,742	1,420,686	1,434,350	\$2.72	
FMAP 18 - 64 M	153,625	1,968,739	12.82	78,899	0	0	\$18,493	316,485	30,042	28,197	472,117	476,658	\$3.10	
Foster 00 - 09 F	27,778	613,914	22.10	123,644	0	0	\$5,767	48,549	6,921	11,864	196,745	198,637	\$7.15	
Foster 00 - 09 M	30,891	946,817	30.65	163,121	0	0	\$8,894	124,031	14,063	16,789	326,898	330,042	\$10.68	
Foster 10 - 22 F	39,470	3,279,735	83.09	431,759	25,565	24,935	\$30,808	409,665	38,570	47,827	1,009,129	1,018,835	\$25.81	
Foster 10 - 22 M	43,993	3,872,860	88.03	481,476	174,474	29,445	\$36,379	425,540	49,287	55,896	1,252,498	1,264,545	\$28.74	
SSI 00 - 17 F	37,516	777,634	20.73	8,324	45,231	0	\$7,305	117,782	12,400	16,643	207,684	209,682	\$5.59	
SSI 00 - 17 M	66,027	1,969,297	29.83	22,511	4,995	0	\$18,498	239,249	35,696	43,878	364,829	368,338	\$5.58	
SSI 18 - 64 F	157,406	9,488,468	60.28	109,531	0	0	\$89,128	1,502,930	156,237	115,005	1,972,832	1,991,807	\$12.65	
SSI 18 - 64 M	113,936	6,337,763	55.63	70,875	0	0	\$59,533	1,171,006	89,807	61,091	1,452,311	1,466,280	\$12.87	
Combined	3,372,228	58,339,487	17.30	2,062,320	320,000	54,380	\$48,000	6,185,161	706,991	855,182	10,732,034	10,835,259	\$3.21	
Non-B3														
Total														
Dual 00 - 64 F	163,063	\$6,359,030	\$39.00	\$20,949	\$0	\$0	\$40,105	\$19,230	\$10,202	\$535,639	\$626,126	\$633,017	\$3.88	
Dual 00 - 64 M	156,792	6,726,037	42.90	26,571	0	0	45,546	55,878	9,281	595,376	732,652	740,562	\$4.72	
FMAP 00 - 17 F	917,442	5,586,284	6.09	97,440	69,735	0	50,064	485,863	66,992	126,510	896,603	905,401	\$0.99	
FMAP 00 - 17 M	937,320	7,047,732	7.52	134,045	0	0	63,117	438,872	89,169	172,130	897,332	906,140	\$0.97	
FMAP 18 - 64 F	526,969	11,514,275	21.85	293,175	0	0	74,365	830,080	98,324	158,082	1,454,025	1,469,929	\$2.79	
FMAP 18 - 64 M	153,625	2,296,088	14.95	78,899	0	0	18,493	316,485	30,042	37,283	481,202	486,121	\$3.16	
Foster 00 - 09 F	27,778	622,937	22.43	123,644	0	0	5,767	48,549	6,921	14,796	199,678	201,610	\$7.26	
Foster 00 - 09 M	30,891	1,042,215	33.74	163,121	0	0	8,894	124,031	14,063	17,929	358,038	361,620	\$11.71	
Foster 10 - 22 F	39,470	3,664,627	92.85	431,759	25,565	27,826	30,808	409,665	38,570	155,801	1,131,262	1,131,262	\$28.66	
Foster 10 - 22 M	43,993	4,247,706	96.55	481,476	174,474	32,260	36,379	425,540	49,287	167,119	1,366,535	1,380,188	\$31.37	
SSI 00 - 17 F	37,516	792,078	21.11	8,324	45,231	0	7,305	117,782	12,400	17,839	208,881	210,906	\$5.62	
SSI 00 - 17 M	66,027	2,008,193	30.41	22,511	4,995	0	18,498	239,249	35,696	48,571	369,522	373,106	\$5.65	
SSI 18 - 64 F	157,406	10,969,940	69.82	109,531	0	0	89,128	1,502,930	156,237	425,389	2,283,216	2,306,494	\$14.65	
SSI 18 - 64 M	113,936	7,190,795	63.11	70,875	0	0	59,533	1,171,006	89,807	280,470	1,671,690	1,688,606	\$14.82	
Combined	3,372,228	70,087,938	20.78	2,062,320	320,000	60,085	\$48,000	6,185,161	706,991	2,782,934	12,665,491	12,794,962	\$3.79	

Milliman, Inc.

Appendix E

Adjustments to Experience and Range of Rates

Appendix E - Adjustments to Experience and Range of Rates

	Member Months	Initial Base PMPM	Annual for annual for 10.5 months			Projected Base PMPM	Financial Experience PMPM	Copy Experience PMPM	IBNR months	CR ACT 2006 B3 Services to State Plan Total Dollars	CR ACT 2006 B3 Services to State Plan PMPM	13.5 months**	Projected 10.5 months	ACT PMPM	State Plan	Non-CR Program Changes	Comm. Fund	Comm. Reinv. Fund	Comm. Services Outreach	Subtotal With Changes	Admini- strative			Managed Care			Projected Rates			06/25/07 Report						
			4.1%	1.1%	Other B(3)																13.5 months	10.5 months	PMPM	Low	Midpoint	High	Low	Midpoint	High	Low	Midpoint	High	Rates	% Increase from Current to Low End	% Increase from Current to Midpoint	% Increase from Current to High End
33	Dual 00 - 64 F	163,063	\$12.81	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	13.55	0	0.00	102.6%	101.4%	\$0.00	\$3.19	\$2.04	\$0.50	\$19.29	116.0%	116.0%	93.9%	100.0%	106.1%	\$21.01	\$22.37	\$23.74	\$29.55	-28.9%	-24.3%	-19.7%					
	Dual 00 - 64 M	156,792	11.97	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	12.66	0	0.00	102.6%	101.4%	0.00	3.70	1.91	0.46	18.74	116.0%	116.0%	93.9%	100.0%	106.1%	20.41	21.74	23.07	31.11	-34.4%	-30.1%	-25.8%					
	MAP 00 - 17 F	917,442	0.28	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	0.30	0	0.00	102.6%	101.4%	0.00	0.01	0.04	0.01	0.35	116.0%	116.0%	93.9%	100.0%	106.1%	0.39	0.41	0.44	0.44	-11.4%	-8.8%	0.0%					
	MAP 00 - 17 M	937,320	0.35	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	0.37	0	0.00	102.6%	101.4%	0.00	0.01	0.06	0.01	0.45	116.0%	116.0%	93.9%	100.0%	106.1%	0.49	0.52	0.55	0.55	-10.9%	-5.5%	0.0%					
	MAP 18 - 64 F	526,969	6.83	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	7.22	0	0.00	102.6%	101.4%	0.00	0.06	1.09	0.26	8.64	116.0%	116.0%	93.9%	100.0%	106.1%	9.41	10.02	10.63	10.5	-10.4%	-4.6%	1.2%					
	MAP 18 - 64 M	153,625	2.13	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	2.25	0	0.00	102.6%	101.4%	0.00	0.06	0.34	0.08	2.74	116.0%	116.0%	93.9%	100.0%	106.1%	2.98	3.17	3.37	3.37	-11.6%	-5.9%	0.0%					
	MAP 00 - 09 F	27,778	0.32	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	0.34	0	0.00	102.6%	101.4%	0.00	0.11	0.05	0.01	0.52	116.0%	116.0%	93.9%	100.0%	106.1%	0.56	0.60	0.63	0.62	-9.7%	-3.2%	1.6%					
	MAP 00 - 09 M	30,891	3.09	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	3.27	0	0.00	102.6%	101.4%	0.00	1.02	0.49	0.12	4.90	116.0%	116.0%	93.9%	100.0%	106.1%	5.34	5.69	6.03	5.89	-9.3%	-3.4%	2.4%					
	MAP 00 - 22 F	39,470	9.75	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	10.31	0	0.00	102.6%	101.4%	0.00	2.85	1.56	0.38	15.10	116.0%	116.0%	93.9%	100.0%	106.1%	14.52	15.41	16.58	16.05	-9.3%	-3.4%	2.5%					
	MAP 00 - 22 M	43,963	8.52	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	9.01	0	0.00	102.6%	101.4%	0.00	2.63	1.36	0.33	13.33	116.0%	116.0%	93.9%	100.0%	106.1%	14.52	15.41	16.58	16.05	-9.3%	-3.4%	2.5%					
	MAP 00 - 17 F	37,516	0.39	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	0.41	0	0.00	102.6%	101.4%	0.00	0.07	0.06	0.01	0.52	116.0%	116.0%	93.9%	100.0%	106.1%	0.56	0.60	0.64	0.64	-20.0%	-14.3%	2.2%					
	MAP 00 - 17 M	66,027	0.59	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	0.62	0	0.00	102.6%	101.4%	0.00	0.07	0.09	0.02	0.81	116.0%	116.0%	93.9%	100.0%	106.1%	0.88	0.94	1.00	1.00	-14.6%	-8.7%	2.9%					
	MAP 18 - 64 F	157,406	9.54	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	10.09	0	0.00	102.6%	101.4%	0.00	2.00	1.52	0.37	13.98	116.0%	116.0%	93.9%	100.0%	106.1%	15.22	16.22	17.21	18.37	-21.4%	-16.3%	11.2%					
	MAP 18 - 64 M	113,936	7.49	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	7.92	0	0.00	102.6%	101.4%	0.00	1.85	1.19	0.23	11.38	116.0%	116.0%	93.9%	100.0%	106.1%	12.37	13.17	13.98	18.71	-33.9%	-29.6%	5.3%					
	Combined	3,372,228	3.48	102.6%	101.4%	101.7%	100.0%	100.0%	100.0%	3.68	0	0.00	102.6%	101.4%	0.00	0.58	0.56	0.14	4.96	116.0%	116.0%	93.9%	100.0%	106.1%	5.40	5.75	6.10	6.99	-22.7%	-17.7%	12.8%					
Non-Comb	Dual 00 - 64 F	163,063	\$26.18	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	\$28.03	151,668	0.93	104.3%	101.0%	101.0%	\$0.98	\$0.70	\$0.00	\$0.00	\$29.71	116.0%	116.0%	93.9%	100.0%	106.1%	\$32.36	\$34.47	\$36.58	\$27.60	17.2%	24.9%	32.5%				
	Dual 00 - 64 M	156,792	30.92	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	33.11	136,263	0.87	104.3%	101.0%	101.0%	0.91	1.03	0.00	0.00	35.06	116.0%	116.0%	93.9%	100.0%	106.1%	38.18	40.67	43.16	31.96	19.5%	27.3%	35.0%				
	MAP 00 - 17 F	917,442	5.81	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	6.22	18,623	0.02	104.3%	101.0%	101.0%	0.02	0.98	0.00	0.00	7.23	116.0%	116.0%	93.9%	100.0%	106.1%	7.87	8.38	8.90	8.23	-4.4%	-1.8%	8.1%				
	MAP 00 - 17 M	937,320	7.17	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	7.68	23,833	0.03	104.3%	101.0%	101.0%	0.03	0.96	0.00	0.00	8.66	116.0%	116.0%	93.9%	100.0%	106.1%	9.43	10.05	10.66	9.87	-4.5%	-1.8%	8.0%				
	MAP 18 - 64 F	526,969	15.02	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	16.09	261,128	0.50	104.3%	101.0%	101.0%	0.52	2.72	0.00	0.00	18.33	116.0%	116.0%	93.9%	100.0%	106.1%	21.05	22.42	23.80	21.46	-1.9%	4.5%	10.9%				
	MAP 18 - 64 M	153,625	12.82	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	13.72	23,761	0.15	104.3%	101.0%	101.0%	0.16	3.10	0.00	0.00	16.99	116.0%	116.0%	93.9%	100.0%	106.1%	18.50	19.71	20.91	19.20	-3.6%	2.7%	8.9%				
	MAP 00 - 09 F	27,778	22.10	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	23.66	655	0.22	104.3%	101.0%	101.0%	0.24	10.68	0.00	0.00	43.74	116.0%	116.0%	93.9%	100.0%	106.1%	47.63	50.74	53.84	49.76	-4.8%	1.4%	8.2%				
	MAP 00 - 09 M	30,891	30.65	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	32.82	6,925	0.71	104.3%	101.0%	101.0%	0.75	25.81	0.00	0.00	115.53	116.0%	116.0%	93.9%	100.0%	106.1%	125.82	134.02	142.23	131.31	-4.2%	2.1%	8.3%				
	MAP 00 - 22 F	39,470	83.09	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	86.97	27,938	0.62	104.3%	101.0%	101.0%	0.65	28.74	0.00	0.00	123.65	116.0%	116.0%	93.9%	100.0%	106.1%	134.66	143.45	152.23	140.68	-4.3%	2.0%	8.2%				
	MAP 00 - 17 F	37,516	20.73	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	22.19	1,048	0.04	104.3%	101.0%	101.0%	0.03	5.59	0.00	0.00	27.81	116.0%	116.0%	93.9%	100.0%	106.1%	30.29	32.26	34.24	31.73	-4.5%	1.7%	7.9%				
	MAP 18 - 64 F	157,406	69.28	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	64.54	108,986	0.69	104.3%	101.0%	101.0%	0.73	12.65	0.00	0.00	77.92	116.0%	116.0%	93.9%	100.0%	106.1%	84.86	90.40	95.93	86.20	-1.6%	4.9%	11.3%				
	MAP 18 - 64 M	113,936	55.63	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	59.56	61,917	0.54	104.3%	101.0%	101.0%	0.57	12.87	0.00	0.00	73.00	116.0%	116.0%	93.9%	100.0%	106.1%	79.50	84.69	89.87	78.71	-1.0%	7.6%	14.2%				
	Combined	3,372,228	17.30	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	18.52	852,778	0.25	104.3%	101.0%	101.0%	0.27	3.21	0.00	0.00	22.00	116.0%	116.0%	93.9%	100.0%	106.1%	23.96	25.52	27.09	24.02	-0.3%	6.2%	12.8%				
Total	Dual 00 - 64 F	163,063	\$39.00	103.7%	101.1%	101.7%	100.0%	100.0%	100.0%	\$41.59	151,668	0.93	103.7%	101.1%	101.1%	\$0.98	\$3.88	\$2.04	\$0.50	\$48.99	116.0%	116.0%	93.9%	100.0%	106.1%	\$53.36	\$56.84	\$60.32	\$57.15	-6.6%	-0.5%	5.5%				
	Dual 00 - 64 M	156,792	42.90	103.8%	101.1%	101.7%	100.0%	100.0%	100.0%	45.77	136,263	0.87	103.8%	101.1%	101.1%	0.91	4.72	1.91	0.46	53.78	116.0%	116.0%	93.9%	100.0%	106.1%	58.59	62.41	66.23	63.07	-7.1%	-1.0%	5.0%				
	MAP 00 - 17 F	917,442	6.09	104.2%	101.1%	101.7%	100.0%	100.0%	100.0%	6.52	18,623	0.02	104.2%	101.0%	101.0%	0.02	0.99	0.04	0.01	7.58	116.0%	116.0%	93.9%	100.0%	106.1%	8.28	8.79	9.34	8.67	-4.7%	-1.4%	7.7%				
	MAP 00 - 17 M	937,320	7.52	104.2%	101.1%	101.7%	100.0%	100.0%	100.0%	8.05	23,833	0.03	104.2%	101.0%	101.0%	0.03	0.97	0.08	0.01	9.11	116.0%	116.0%	93.9%	100.0%	106.1%	9.92	10.57	11.21	10.42	-4.8%	-1.5%	7.0%				
	MAP 18 - 64 F	526,969	21.85	103.7%	101.1%	101.7%	100.0%	100.0%	100.0%	23.31	261,128	0.50	103.7%	101.1%	101.1%	0.52	2.79	1.09	0.26	27.97	116.0%	116.0%	93.9%	100.0%	106.1%	30.46	32.44	34.43	31.96	-4.7%	-1.4%	7.0%				
	MAP 18 - 64 M	153,625	14.95	104.3%	101.0%	101.7%	100.0%	100.0%	100.0%	15.97	23,76																									

Appendix F
Summary of Rate Ranges

Appendix F - Summary of Rate Ranges

Category/Age Range	Iowa Plan for Behavioral Health SFY 2008					
	Capitation Rates - Total					
	Lower Bound		Midpoint		Upper Bound	
	Female	Male	Female	Male	Female	Male
FMAP 0 - 17	\$8.26	\$9.92	\$8.79	\$10.57	\$9.34	\$11.21
FMAP 18 - 64	30.46	21.48	32.44	22.88	34.43	24.28
SSI 0 - 17	30.85	41.78	32.86	44.51	34.88	47.24
SSI 18 - 64	100.08	91.87	106.62	97.86	113.14	103.85
Dual Eligibles 0 - 64	53.36	58.59	56.84	62.41	60.32	66.23
Foster Care 0 - 9	34.15	52.97	36.38	56.43	38.60	59.87
Foster Care 10 - 22	142.26	149.18	151.53	158.91	160.81	168.64

Category/Age Range	Iowa Plan for Behavioral Health SFY 2008					
	Capitation Rates - State Plan					
	Lower Bound		Midpoint		Upper Bound	
	Female	Male	Female	Male	Female	Male
FMAP 0 - 17	\$7.87	\$9.43	\$8.38	\$10.05	\$8.90	\$10.66
FMAP 18 - 64	21.05	18.50	22.42	19.71	23.80	20.91
SSI 0 - 17	30.29	40.90	32.26	43.57	34.24	46.24
SSI 18 - 64	84.86	79.50	90.40	84.69	95.93	89.87
Dual Eligibles 0 - 64	32.36	38.18	34.47	40.67	36.58	43.16
Foster Care 0 - 9	33.59	47.63	35.78	50.74	37.97	53.84
Foster Care 10 - 22	125.82	134.66	134.02	143.45	142.23	152.23

Category/Age Range	Iowa Plan for Behavioral Health SFY 2008					
	Capitation Rates - B(3) Services					
	Lower Bound		Midpoint		Upper Bound	
	Female	Male	Female	Male	Female	Male
FMAP 0 - 17	\$0.39	\$0.49	\$0.41	\$0.52	\$0.44	\$0.55
FMAP 18 - 64	9.41	2.98	10.02	3.17	10.63	3.37
SSI 0 - 17	0.56	0.88	0.60	0.94	0.64	1.00
SSI 18 - 64	15.22	12.37	16.22	13.17	17.21	13.98
Dual Eligibles 0 - 64	21.00	20.41	22.37	21.74	23.74	23.07
Foster Care 0 - 9	0.56	5.34	0.60	5.69	0.63	6.03
Foster Care 10 - 22	16.44	14.52	17.51	15.46	18.58	16.41